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CONFIRMATION NO. 5909

Bib Data Sheet

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|--|---|-----------------------------------|--|--|------------------------------------|
| SERIAL NUMBER 10/797,933 | FILING OR 371(c) DATE 03/10/2004 RULE | CLASS 005 | GROUP ART UNIT 3673 | ATTORNEY DOCKET NO. 355774.00301 | |
| APPLICANTS Douglas Tharalson, Agoura, CA; Diana Tharalson, Agoura, CA; Bruce Martin, Malibu, CA; | | | | | |
| ** CONTINUING DATA ***** This application is a REI of 09/838,041 04/20/2001 PAT 6,578,211 and is a CIP of PCT/US00/14086 05/22/2000 | | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 05/09/2004 | | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <u>Examiner's Signature</u> <u>Initials</u> | | STATE OR COUNTRY CA | SHEETS DRAWING 17 | TOTAL CLAIMS 53 | INDEPENDENT CLAIMS 1 |
| ADDRESS 28983 | | | | | |
| TITLE Combination co-sleeper and changing table | | | | | |
| FILING FEE RECEIVED 385 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |